STATE OF MARYLAND
DEPARTMENT OF ASSESSMENTS AND TAXATION
PERSONAL PROPERTY DIVISION
301 West Preston Street, Room 801
Baltimore, MD 21201-2395
www.dat.maryland.gov
(410) 767-4991 • (888) 246-5941 within Maryland

CHECK IF THIS IS A CHANGE

OWNER'S NAME, TRADING AS NAME, AND MAILING ADDRESS:

year of acquisition and manner of disposal.

REMARKS _

OF MAILING ADDRESS

MRS 1-800-735-2258 TT/VOICE

ANNUAL PERSONAL PROPERTY RETURN OF SOLE PROPRIETORSHIPS AND GENERAL PARTNERSHIPS

AS OF JANUARY 1, 2015 DUE APRIL 15, 2015

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Form AT3-51 Page 1 of 2

Date Received by Department

		DEPARTMENT ID	O NO.
	Please check here if you want personal property form mailed to you next year.	Click here to ac	an be filed online. ccess the MD EGov site
PA	RT A		
1.	Provide your federal employer ID #	(if none, provide s	social security number of owner).
2.	Provide your federal principal business code #	(from II	RS Schedule C or Form 1065).
3.	IMPORTANT: List exact location of all personal proper This assures proper distribution of assessments. If propies of Part B for each location.		
	NOTE: If all of the personal property of this business is Queen Anne's, or Talbot, you may be eligible to skip P Refer to Specific Instructions, Part A, 3 for more inform	Part B, Line Items ① through ⑤. Be sur	
	(STREET NUMBER & NAME)	(ZIP CODE) (COUNTY)	(INCORP. TOWN)
	Check if this location has changed from the 2014 re	eturn.	
4.	State your nature of business or profession:		Date began:
5.	Total gross sales or amount of business transacted during If the business has sales in Maryland and does not rep conducted without personal property. If the business is address of that business.	ort any personal property, in remarks be	elow explain how the business is
6.	Only sole proprietors complete questions 6a and 6b.		
6a.	Is this location the principal residence of the business own	ner?(Yes or No)	
6b.	Is the total original cost of all the property, including inven If you answer yes to both 6a and 6b, your property is exe Skip to signature line on page 2.		
7.	State the opening and closing dates of your fiscal year.		
8.	Do you have any fully depreciated property or property ex	opensed under IRS rules?	If yes, have you
	included such property on this return?(Yes or No)	(tes of No)	
9.	Property leased by your business. See Instructions for Pa	art A, 9.	
10.	Has the business disposed of assets during 2014?	If ves. supply a schedule of dispo	osition by

(Yes or No)

PART B

① Furniture, fixtures, office equipment, tools, machinery, equipment NOT used in manufacturing or research and development. See Instruction ①. Failure to provide the required detail will result in the reported property being assessed at 10% rate of depreciation.

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Δ .		SPECIAL DEP	RECIATION RATES	(See Instruction ()) F	G	TOTAL COST
2014	1	В С			<u> </u>	G	TOTAL COS
2013							
2012							
2012							
2010							
2009							
2008							
2007 and prior							
Commercial Inventory Average Monthly Inventory * Note: Businesses that Supplies See Instruction ③. Tools, machinery and manufacturing / R&D, a	t need a Tra Average C s equipment nd is claimin fore Septen	ruction ②. Furnish from the land of the properties of the properti	- date date date - turing and/or reconfor the first tire an exemption on	ercial inventonufacturing an earch and deventory. See Inserted & deventory and manufacturing the granted on for tax year	amount \$ amount \$ amount \$ amount \$ ary here. Ind/or velopment truction 4. Irelopment. If this cturing/R&D exists. Contact the Dears beginning af	Ave \$ s busi emption	on application mus nent or visit ne 30, 2009 - an
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